

## **Traveler's Expense Accounting Sheet for Area/Site Visit**

**Today's Date:** \_\_\_\_\_

**Traveler's Name:** \_\_\_\_\_ **Soc. Sec. No.:** \_\_\_\_\_

**Authorization No.:** \_\_\_\_\_

**Traveler's Home Address:**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Site Visit:**

Left HDQ/ home at \_\_\_\_\_ am/ pm on \_\_\_\_\_ (date)

Arrived at duty location at \_\_\_\_\_ am/ pm

**Overnight Hotel Stay:**

Date	County	M&IE	City, State	Lodging/Tax

**TOTALS:** \$ \_\_\_\_\_ \$ \_\_\_\_\_

Left site at \_\_\_\_\_ am/ pm

Returned to HDQ/ home on \_\_\_\_\_ (date) at \_\_\_\_\_ am/ pm

**Expenses:**

Authorized phone call: \_\_\_\_\_

Authorized phone call: \_\_\_\_\_

Authorized phone call: \_\_\_\_\_

Authorized phone call: \_\_\_\_\_

Emergency field purchase: \_\_\_\_\_

Emergency field purchase: \_\_\_\_\_

ATM 1.9% fee: \_\_\_\_\_

ATM bank terminal fee: \_\_\_\_\_

POV Mileage @ \_\_\_\_\_

**Account No.:** \_\_\_\_\_

**Total M&IE:** \_\_\_\_\_

**Total Lodging:** \_\_\_\_\_

**Total Lodging Tax:** \_\_\_\_\_

**Total Expenses:** \_\_\_\_\_

**Total claimed:** \_\_\_\_\_